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APPLICANTS									
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This appln  ** FOREIGN APF  IF REQUIRED, F	claim PLICA	\( ***********************************	0 02/28/2						
** 05/24/2004 Foreign Priority claimed		uges uno		<del>.</del>	-	_			
35 USC 119 (a-d) conditions				STATE OR	SHEETS		TOT	AL	INDEPENDENT
				COUNTRY CA			CLAI 50		CLAIMS 3
ADDRESS 23639 BINGHAM, MCCI THREE EMBARC 18 FLOOR SAN FRANCISCO 94111-4067	ADE	RO CENTER							
TITLE Method and syste	em foi	r solving satisfiability p	roblems						
	FEES: Authority has been given in Paper No. to charge/credit DEPOSIT ACCOUNT					☐ All Fees			
						1.16 Fees ( Filing )			
FILING FEE	No to charge/credit DEPOSIT ACCOUNT No for following: 1.17 Fees ( Proce time )							essing Ext. of	
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